



Inspection Services Division
Department of Community Planning and Development
City of Rockville
111 Maryland Avenue, Rockville, Maryland 20850
240-314-8240 • fax 240-314-8265

APPLICATION FOR ELECTRICAL PERMIT

Property Address _____

Master Electricians Name _____

Address _____ City License # _____

Owner Name _____ Home Phone _____

Owner's Address if different _____

_____ Residential or _____ Commercial _____ New Building or _____ Old Building

Fixtures: *Indicate all New, Replacement or Relocated*

Rough Outlets # _____ Fixture # _____ Htg/Cooling Units # _____

Low Volts # _____ Pole Construction # _____ Signs # _____

Protect Sig. Cir. # _____ Smoke Dets # _____ Generator # _____

Cable Htg. Units # _____ Other _____ # _____

(Circle) chillers, basebrd htg, heat pump, radiant

Motor # _____ @ _____ hp Motor # _____ @ _____ hp Motor # _____ @ _____ hp

(Circle) disposal, air handler, jacuzzi, hot tub, exhaust fan, fire pump

Services/Meters/Subpanels # _____ <=225 amps # _____ 226-400 amps

_____ 401-1000 amps # _____ >1000 amps

Heavy up # _____ to _____ amps

Transformers # _____ @ <200kva # _____ @ <200-500kva # _____ @ >1000kva

Rough outs and Fixtures by Homeowner # _____ Date of Cert _____

Appliances # _____

(Circle) range, trash, air filter, dryer, hwh, ice, dshwshr, sump, humidifier, wtrsoft, freezer

Submeter: _____ Submeter Size

Low Volts Pool Lights # _____

Master Electrician's Signature _____